



**EMPLOYMENT APPLICATION**



## APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL INFORMATION  
REQUESTED EXCEPT SIGNATURE



Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Maiden

Address: \_\_\_\_\_  
Number Street City State Zip

How Long at Address: \_\_\_\_\_ Years \_\_\_\_\_ Months Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone No.: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ If under the age of 18, please list age: \_\_\_\_\_

Position Applied For: (1) \_\_\_\_\_ (2) \_\_\_\_\_

Desired Rate of Pay: \$ \_\_\_\_\_ Available Start Date: \_\_\_\_\_

Employment Desired: \_\_\_\_\_ Full Time Only \_\_\_\_\_ Part Time Only \_\_\_\_\_ Full Time or Part Time

How Many Hours Can You Work Weekly: \_\_\_\_\_ Can You Work Nights: \_\_\_\_\_ Available to Travel: \_\_\_\_\_

Days/Hours Available: Any \_\_\_\_\_ Mon \_\_\_\_\_ Tue \_\_\_\_\_ Wed \_\_\_\_\_ Thu \_\_\_\_\_  
Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

| EDUCATION           | NAME OF SCHOOL | YEARS COMPLETED | HIGHEST DEGREE EARNED | GPA |
|---------------------|----------------|-----------------|-----------------------|-----|
| High School         |                |                 |                       |     |
| Trade School        |                |                 |                       |     |
| Professional School |                |                 |                       |     |
| College             |                |                 |                       |     |
| Graduate School     |                |                 |                       |     |

Awards / Achievements: \_\_\_\_\_

Have You Ever Been Convicted Of A Crime: \_\_\_\_\_ YES \_\_\_\_\_ NO

Do Not Include Arrests Without Conviction or Convictions Adjudged "Youthful Offender"

If Yes, Explain; (1) Number Of Convictions, (2) Nature Of Offenses, (3) How Recently Such Offenses Was/Were Committed, (4) Sentences Imposed, and (5) Types of Rehabilitation: \_\_\_\_\_

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Do You Have A Driver's License: \_\_\_\_\_ YES \_\_\_\_\_ NO Driver's License Number: \_\_\_\_\_

State Of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Driver's License Class: \_\_\_\_\_

Have You Had Any Accidents During The Past Three Years: \_\_\_\_\_ YES \_\_\_\_\_ NO How Many: \_\_\_\_\_

Have You Had Any Moving Violations During The Past Three Years: \_\_\_\_\_ YES \_\_\_\_\_ NO How Many: \_\_\_\_\_

Please List Two Professional References Other Than Relatives:

|                              |                              |
|------------------------------|------------------------------|
| Name: _____                  | Name: _____                  |
| Position: _____              | Position: _____              |
| Company: _____               | Company: _____               |
| Address: _____               | Address: _____               |
| _____                        | _____                        |
| Phone: (     ) _____ - _____ | Phone: (     ) _____ - _____ |

An Application Sometimes Makes It Difficult For An Individual To Adequately Summarize A Complete Background. Use The Space Below To Summarize Any Additional Information Necessary To Describe Your Full Qualifications For The Specific Position For Which You Are Applying.

\_\_\_\_\_

Have You Ever Been In The Armed Forces: \_\_\_\_\_ YES \_\_\_\_\_ NO

Are You Currently A Member Of The National Guard: \_\_\_\_\_ YES \_\_\_\_\_ NO

Specialty: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

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WORK EXPERIENCE: Please List Your Work Experience For the **Past Five Years** Beginning With Your Most Recent Job Held.

|                     |                           |                          |               |
|---------------------|---------------------------|--------------------------|---------------|
| Name Of Employer:   | _____                     | Name of Last Supervisor: | _____         |
| Address:            | _____<br>_____            | Employment Dates:        | _____ - _____ |
| Phone Number:       | (     )     _____ - _____ | Starting Pay or Salary:  | _____         |
| Reason For Leaving: | _____                     | Ending Pay or Salary:    | _____         |
|                     |                           | Last Held Job Title:     | _____         |

Below, List The Jobs Held, Duties Performed, Skills Used Or Learned, Advancements Or Promotions While You Worked At This Company:

|                     |                           |                          |               |
|---------------------|---------------------------|--------------------------|---------------|
| Name Of Employer:   | _____                     | Name of Last Supervisor: | _____         |
| Address:            | _____<br>_____            | Employment Dates:        | _____ - _____ |
| Phone Number:       | (     )     _____ - _____ | Starting Pay or Salary:  | _____         |
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\_\_\_\_\_

|                     |                           |                          |               |
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\_\_\_\_\_

|   |                |   |                |
|---|----------------|---|----------------|
| May We Contact Your Current Employer:         | ___ YES ___ NO |   |                |
| Are You A Citizen Of the United States:       | ___ YES ___ NO | If Not, Are You Authorized To Work In The US: | ___ YES ___ NO |
| Have You Ever Worked For This Company:        | ___ YES ___ NO | If Yes, When:                                 | _____          |
| Have You Ever Worked For City Neon:           | ___ YES ___ NO | If Yes, When:                                 | _____          |
| Do You Know Anybody Working For This Company: | ___ YES ___ NO | If Yes, Who:                                  | _____          |
| Do You Know Anybody Working For City Neon:    | ___ YES ___ NO | If Yes, Who:                                  | _____          |

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In exchange for the consideration of my job application by City Neon USA LLC (hereinafter called the “Company”), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of the Company. Both the undersigned and the company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that for certain positions (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I additionally understand that my employment with the Company shall be at will, and further that at any time during my employment relation with the Company it shall be terminable at will for any reason by either party. I further understand any and all contractual employment agreements shall survive any and all terminable results for any reason

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Signature Of Applicant

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Date of Signature

City Neon USA LLC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

**Thank you for completing this application and for your interest in City Neon USA LLC.**